

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KN		8/2/01
O.I.P.E. CLASSIFIER		12	4/1/01
FORMALITY REVIEW	Zm	927	04/25/01
RESPONSE FORMALITY REVIEW	LC	1024	10/26/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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10	✓	✓	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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H. 5.  
 4-25-01  
 5/28  
 10-26-01